

## CLAIMS ONLY

Application Number

10/672535

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT				
	Indep	Depend	Indep	Depend	Indep	Depend			
1	/								
2	/								
3	/								
4	/								
5	/								
6	/								
7	/								
8	/								
9	/								
10	/								
11	/								
12	/								
13	/								
14	/								
15	/								
16	/								
17	/								
18	/								
19									
20									
21									
22									
23									
24									
25									
26									
27									
28									
29									
30									
31									
32									
33									
34									
35									
36									
37									
38									
39									
40									
41									
42									
43									
44									
45									
46									
47									
48									
49									
50									
Total Indep	3								
Total Depend	18								
Total Claims	21								

←      ←      ←  
 Total Indep      Total Depend      Total Claims